In accordance with section 109 of the Insolvency Act 1986

# 600



Companies House

Notice of appointment of liquidator in a members' or creditors' voluntary winding up

MONDAY



RES

08/02/2021 COMPANIES HOUSE

Company details → Filling in this form 4 7 7 Company number 0 6 3 3 3 Please complete in typescript or in bold black capitals. Company name in full Beyondstock Limited Liquidator's name Full forename(s) Sandra Surname McAlister Liquidator's address Building name/number 10 St Helen's Road Street Post town Swansea County/Region Postcode Α 4 A W Country Liquidator's email address or telephone number • • You must give an email address or telephone number. All information Email address on this form will appear on the public record. Telephone number 03300563600 5 Insolvency practitioner number Number

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6	Liquidator's name •	
Full forename(s)	Robert William Leslie	Other Liquidator's details Use this section to tell us about
Surname	Horton	another liquidator.
7	Liquidator's address ®	
Building name/number	1 Royal Exchange Avenue	Other Liquidator's details
Street		Use this section to tell us about another liquidator. Use the continuation page to tell us about more than two liquidators.
Post town	London	
County/Region		
Postcode	EC3V3LT	
Country		
8	Liquidator's email address or telephone number ©	You must give an email address or
Email address	rob@r2a.uk.com	telephone number. All information on this form will appear on the
Telephone number	02070434191	public record.
9	Insolvency practitioner number	<del></del>
Number	X 8 8 8 8922	
10	Statement of appointment	
	I confirm the appointment of the liquidator(s) on	
Date	$\begin{bmatrix} d & 0 & 0 & 0 & 0 \end{bmatrix}$ $\begin{bmatrix} 0 & 0 & 0 & 0 \end{bmatrix}$ $\begin{bmatrix} 0 & 0 & 0 & 0 & 0 \end{bmatrix}$ $\begin{bmatrix} 0 & 0 & 0 & 0 & 0 & 0 \\ 0 & 0 & 0 & 0 &$	
11	Appointment details	
	The appointment was made by (Tick one)  Company Creditors	
12	Type of liquidation	<del></del>
	Tick to confirm the liquidation type  Members  Creditors	
13	Sign and date	
Liquidator's signature	Signature X	×
Signature date	d 0 d 5 m 2 y 2 y 0 y 2 y 1	
	<u> </u>	. <del></del>

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Presenter information		
you do it on the fo	not have to give any contact information, but if t will help Companies House if there is a query orm. The contact information you give will be o searchers of the public record.	
Contact name	Helen Whitehouse	
Company nam	<sup>ne</sup> McAlister & Co Insolvency	
Practiti	ioners Limited	
Address	10 St Helen's Road	
Swans	ea	
Post town	SA1 4AW	
County/Region	n	
Postcode		
Country		
DX		
Telephone	03300563600	
<b>√</b> Cho	ecklist	
	return forms completed incorrectly or formation missing.	
follow	make sure you have remembered the ing: company name and number match the	

information held on the public Register.□ You have signed and dated the form.

#### Important information

All information on this form will appear on the public record.

## Where to send

You may return this form to any Companies House address, however for expediency we advise you to return it to the address below:

The Registrar of Companies, Companies House, Crown Way, Cardiff, Wales, CF14 3UZ. DX 33050 Cardiff.

# i Further information

For further information please see the guidance notes on the website at www.gov.uk/companieshouse or email enquiries@companieshouse.gov.uk

This form is available in an alternative format. Please visit the forms page on the website at www.gov.uk/companieshouse